



SWIMMER CERTIFICATION APPLICATION FORM

[For use by Unregistered Competitors participating in BSF-sanctioned events]

(Please complete all sections)

SECTION A APPLICANT INFORMATION:

Name: _____

P.O. Box #: _____

Current Street Address: _____

Birth Date: _____

Telephone(s): _____

Sex: Male Female

SECTION B HOST CLUB/ORGANIZATION INFORMATION:

Name: _____

Telephone(s): _____

Date of Event: _____

Location: _____

SECTION C BSF RELEASE:

Warning!: Only well-prepared and medically fit persons should enter this competition.

I hereby apply to be certified for participation in the above sanctioned competition. I confirm that I am not presently registered with the Bahamas Swimming Federation or any other Member of FINA. I hereby enclose the \$5.00 BSF Certification Fee.

I clearly understand (and confirm my understanding by signing this document) that the Bahamas Swimming Federation shall be free from any liabilities or claims for damages arising from my death or injuries to myself or anyone else during the above competition.

Signature of Applicant (or Parent, if under 18 years)

Date

SECTION D NOTES:

The Host Club/Organization is responsible for ensuring that this form is properly filled in and signed.

The Host Club/Organization is responsible for collecting the \$5.00 Certification Fee and remitting this form and the fee to the BSF Assistant Secretary or the BSF Meet Representative at the conclusion of the sanctioned competition.

This certification immediately lapses upon the conclusion of the above competition.

P.O. Box SS 6166 Nassau, Bahamas Affiliated to the F.I.N.A. C.C.C.A.N. B.O.A.